91025405 (08.63) 2006/220 GMG AZIVZVG Aguerts eas will bewer 2006/24 U.S. DEPARTMENT OF COMMERCE

PATENT APPLICATION FEE DETERMINATION RECORD Arrivation or Doctor Number.										
Substitute for Form PTO-875								D9/874587		
CLAIMS AS FILED - PART 1 (Column 1) (Column 2)						SMALL ENTITY		ОН	OTHER THAN SMALL ENTITY	
FOR			NUMBER FILED		er extra	RATE	FEE			***
	IC FEE DFR 1.1G(a))								RATE	FEE
	AL CLAMS OFR LISION		minus 20 4				1,	OR	<u> </u>	S
UNDEPENDENT CLAUS		4	marks 50 .			A 5	1	OR	X 3 . •	
137	CFR 3.16(b)		minus 3	• •		A 5		OR	x 5	
*02	TIPLE DEPENDE	HI CLAM PRE	SENT E	37 CFR 1.18601	1,,		OR	+5		
' d Pro Glisterace no culumno i es ress tican pero, ambe 'o' et Combin Z.						1014		i OH	IOTAL	
Contribution of Marine										
12	- ZO-DS			(Column 2)	(Column 3)	SMALL	ENTITY	ง ส	OTHE	THAN . ENTITY
ENT A		CLANS REMANDA AFTER AMENOMEN		HUGHEST HUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TICHAL FEE		RATE	ADDI- FERE
AMENDMENT	Total CP O'R LARCE	17	Minus	" 20	•	15		OR	25	722
Ų	Ch Qu'intre	' 4	Minus	<u> </u>	. /	X1		OR.	x 5 •	
₹	FIRST PRESENTATION OF MALTIPLE DEPENDENT QLAIM. (37 OFR 1,14(4))					+;		DR	+5	
·						TOTAL ADD'S FEE		OR	TOTAL ADD'L FEE	
3-17-06 (Column 1) (Column 2) (Column 2)										
ENDMENT B		CLAIMS REMAINING AFTER AMENICMEN	·	HIGHEST HUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
M	Total grom uses	17	Mileus	- 8D	•	x1		or.	X 5 -	
E E	On Case riveling purposessions	. 4	Minus	- 9	•	x3		OA.	XS .	•
FIRST PRESENTATION OF MATURE DEPONDENT GLAM (27 GPR 1, MIND)						••_•		OR	+:	
						TOTAL ADD'L FEE		OR	TOTAL ADDI FEE	
7	-1-06	(Cotama 1)		(Calumn 2)	(Column 3)	·		•		
ENDMENT C		REMARKS REMARKS AFTER AMENOMEN	з · п	NIGHEST MUMBER PREVIOUSLY FAID FOR	PRESENT EXTRA	RATE	ADOI- TIONAL FEE		RATE	ADDI- TIONAL FEE
§	CO CON LINES	19	Minus	20	B	X1		OR	x s =	
5	frdepardent (or OFR 1,40pg	_4	Minus	13	1.4	X1	·	OR	'x 3	
FRET PRESENTATION OF MATERIA DEPENDENT GLAM (\$770FR LISIN)								OR		
						TOTAL ADD'S FEE		OR	TOTAL ADD'L FEE	
" If the entry in column 1 is less than the entry in column 2, water "I' in column 3. " If the "Highest Humber Previously Paid For" IN THIS SPACE is less than 20, water "20", "If the "Highest Humber Previously Paid For" IN THIS SPACE is less than 2, enter "20", The "Highest Humber Previously Paid For" (Total or independent) is the highest increase found in the appropriate box in column 1. This collection of information is required by ST CFR 1.16. The information is required to obtain a benefit by the public state in the family in the										

M maketing this burder, educal be sent to the Chief Starmetton Officer, U.S. Pelest India, VA 22313-1658, DO NOT SEND FEED OR COMPLETED FORMS TO THIS Wife, VA 22265-1658.

the Botans, and i-800-970-9180 and soled option 2.